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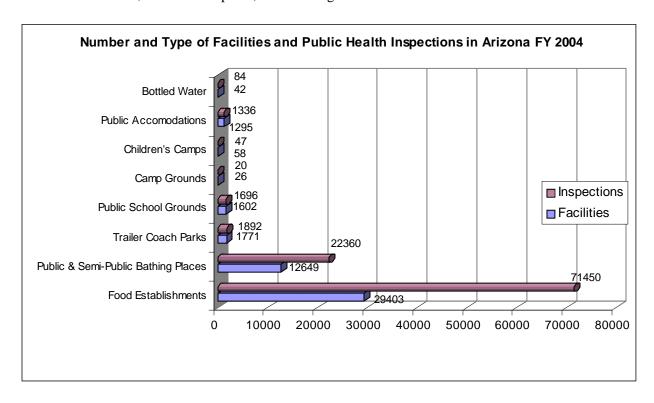
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Executive Summary

The Arizona Department of Health Services plans, organizes and directs a statewide public health sanitation program for food safety, bottled water, public accommodations, e.g., hotels and motels, children's camps, public school grounds, and public and semi-public bathing places.

Personnel that carry out the provisions of the program must be licensed as a Registered Sanitarian in the State of Arizona or, under specific conditions, a Sanitarian Aide under the direct supervision of an Arizona Registered Sanitarian. There were 168 Registered Sanitarians and 19.5 Sanitarian Aides employed with the 15 Arizona county health departments and Arizona Department of Health Services during FY 2004. The following bullets highlight FY 2004 accomplishments and findings.

- One hundred sixty eight Registered Sanitarians and 19.5 Sanitarian Aides at the Arizona Department
 of Health Services and 15 Arizona county health departments conducted 98,885 inspections at 46,846
 regulated facilities in Arizona.
- During FY 2004, there were 29,403 regulated food establishments in Arizona. A total of 71,450 food safety inspections (routine, re-inspection, and pre-operational) were conducted at those establishments.
- A total of 2,257 cases of foodborne illnesses were reported to the Arizona Department of Health Services in calendar year 2003.
- Inspection goals were achieved for food establishments, bottled water facilities, bathing places, public accommodations, trailer coach parks, and school grounds.



1.0 Introduction

The Food Safety and Environmental Services Section of the Office of Environmental Health, Arizona Department of Health Services, has overall responsibility for the supervision of food safety and environmental sanitation monitoring and enforcement in the State of Arizona in accordance with Arizona Revised Statues §36-136. The mission of the Food Safety and Environmental Services Section is:

To prevent and control human illness related to the transmission of infectious agents or toxic substances in food and water, and to prevent disease transmission due to unsanitary conditions in hotels and motels, trailer coach parks, bathing places, group homes, behavioral health centers, adult foster care homes and children's camps.

The Food Safety and Environmental Services Section plans, organizes and directs a statewide public health sanitation program which includes food safety, bottled water, public accommodations, e.g., hotels and motels, children's camps, public school grounds, and public and semi-public bathing places. The program conducts epidemiological investigations, interprets sanitation laws and rules for Arizona county health departments and establishes and maintains liaisons with federal agencies and local health departments.

2.0 FY 2004 Activities

The Arizona Department of Health Services delegates several program responsibilities to the 15 Arizona county health departments in order to most effectively accomplish mission objectives. The delegation of responsibilities allows local governments to decide the level and cost of the services they wish to provide. Local control makes it easy for the public to interact with their government.

Counties accepting delegated responsibilities are required to perform duties in accordance with conditions outlined in their specific delegation agreement with the Arizona Department of Health Services. County health departments must submit annual reports summarizing their program activities as described in their delegation agreements.

Facilities regulated by the state and counties include various food establishments, bottled water facilities, public accommodations, e.g., hotels and motels, children's camps, public school grounds, and public and semi-public bathing places. Personnel that carry out the provisions of the program must be licensed as a Registered Sanitarian in the State of Arizona or, under specific conditions, a Sanitarian Aide under the direct supervision of an Arizona Registered Sanitarian. One hundred sixty eight Registered Sanitarians and 19.5 Sanitarian Aides at the 15 Arizona county health departments and Arizona Department of Health Services conducted 98,885 inspections at the 46,846 regulated facilities in Arizona during FY 2004.

2.1 Food Safety

2.1.1 Inspection Programs

Restaurants, food markets, mobile food units, food processors, prison and jail eating facilities, food warehouses, bakeries, and school cafeterias are routinely inspected to evaluate food safety practices in these establishments.

There were 29,403 regulated food establishments in Arizona during FY 2004. State and county sanitarians and sanitarian aides conducted 71,450 food safety inspections (routine, re-inspection, and pre-operational) at these facilities. The statewide goal to inspect these establishments twice a year was achieved during FY 2004. An average of 2.43 inspections per food establishment was achieved.

A classification scheme categorizes food establishments by the complexity of the food service operations. More complex operations conduct a greater variety of food service activities and may require more frequent inspections in order to ensure that all food safety measures are being followed. The classification scheme is as follows:

Complex

- The facility prepares and holds hot or cold food for more than 12 hours before serving; and/or
- The facility cooks and cools a significant number of foods during the food handling process; and/or
- The facility prepares food for off-site service; and/or
- The facility vacuum packs food; and/or
- The facility serves a highly susceptible population.

Medium

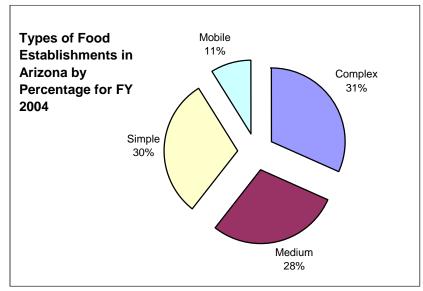
- The food prepared in the facility from raw ingredients requires minimal assembly; and/or
- Hot or cold food preparation in the facility is restricted to same day service; and/or
- Foods requiring preparation in the facility are from approved processing facilities.

Simple

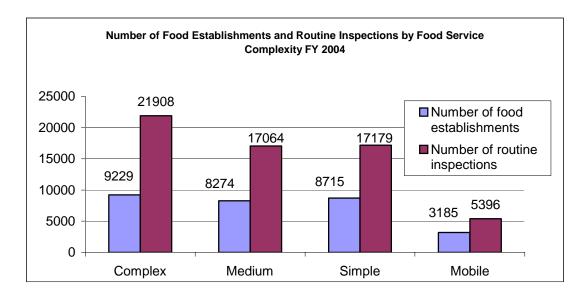
- Only pre-packaged potentially hazardous foods are available or sold; and/or
- The potentially hazardous foods served are commercially pre-packaged in an approved food processing facility; and/or
- The facility only has limited preparation of potentially hazardous foods and beverages; and/or
- The facility only serves beverages.

Mobile

• The establishment is not stationary, and has the ability to be moved by motor vehicle or by a person.



In Arizona, food establishments that are classified as high and medium complexity were inspected more frequently than simple facilities. There were 2.4 inspections per complex facility, 2.1 inspections per medium facility and 2.0 per simple facility. This pattern is consistent with Arizona Department of Health Services' recommendations to inspect complex food service operations more frequently than simple food service facilities.



2.1.2 Enforcement

The goal of food safety inspection programs is to encourage compliance with state food safety requirements without resorting to compliance proceedings and enforcement actions. Unfortunately, these actions are sometimes necessary to achieve compliance with minimum requirements. During FY 2004, 820 enforcement actions were taken at food establishments in Arizona. Statewide, compliance proceedings or enforcement actions were taken at approximately 2.8% of food establishments.

2.1.3 Food Safety Accomplishments in Arizona

- The University of Arizona Cooperative Extension Program in collaboration with the Arizona Department of Health Services' Office of Environmental Health set up an Azsafefood Listserv. The Listserv is designed to serve as a communication tool for Arizona Registered Sanitarians and other individuals with an interest in food safety and related environmental issues in Arizona. Currently, the Listserv has over 90 members.
- Six Arizona counties continued to participate in the U.S. Food and Drug Administration's Voluntary National Retail Food Regulatory Program Standards. The program is designed to foster national uniformity among regulatory programs responsible for retail food protection. The six counties participating are Coconino, La Paz, Maricopa, Pima, Pinal and Yavapai.

2.1.4 Food Safety Update

The Arizona Revised Statutes went through a legislative change that places milk at the retail level under the authority of the Arizona Department of Health Services. All 15 Arizona counties have a delegation agreement with the Arizona Department of Health Services and have authority to inspect milk within the

retail environment. Previously, the Arizona Department of Agriculture had this responsibility. The Arizona Department of Agriculture retains the authority for milk processing and dairy operations.

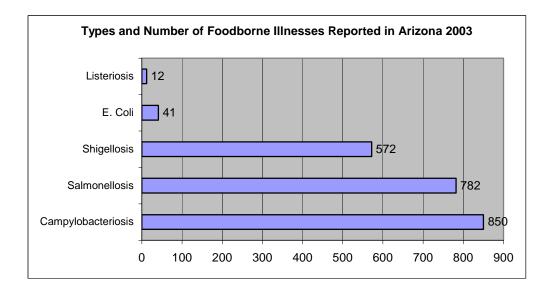
2.1.5 Food Biosecurity

The Arizona Department of Health Services Food Biosecurity Program, in its second year, continued to make progress with program and activity delivery to the 15 Arizona counties. On-site visits were made to selected counties to assist in the development and delivery of a voluntary food biosecurity program tailored to each individual county. Additional efforts will be directed at educational outreach to the food industry through the Arizona county health departments during the next fiscal year.

2.1.6 Reports of Foodborne Illnesses

The Arizona Department of Health Services conducts surveillance for foodborne illnesses and other enteric diseases and helps the county health departments conduct additional investigations of disease outbreaks. Environmental investigations, including a focused inspection, are conducted when gastrointestinal diseases are suspected to be associated with a foodborne illness. When a link between foodborne illness and a food establishment is made a detailed investigation in conducted to determine the source.

The following sections provide a foodborne illness epidemiology update for 2003.



Arizona continued a recent downward trend in cases of salmonellosis and shigellosis in 2003. However, the rate of cases of campylobacteriosis has increased each of the last six years.

Campylobacteriosis

Campylobacteriosis is the most common laboratory confirmed gastrointestinal illness in Arizona and one of the most common nationally. The Arizona Department of Health Services received 850 reported cases of Campylobacteriosis in 2003. *Campylobacter jejuni* is the most common causative organism isolated, although other *Campylobacter* species are rarely reported. Rates of campylobacteriosis have been increasing in Arizona since 1998. While 7.6 cases per 100,000 were reported in 1998, the total number of cases statewide has jumped to 850 in 2003, translating to 15.1 cases per 100,000. There is a large disparity between counties in rates of campylobacteriosis as well. Greenlee, Mohave, and Yuma counties all report

less than 5 cases per 100,000 while Apache (80.7), Coconino (51.2), and Santa Cruz (31.8) counties report rates of infection more than double the mean statewide rate. Some of this increase may be due to increasing awareness, testing ability, and reporting of the causative organism among providers. However, a doubling of the infection rate over a period of six years is concerning and most likely cannot be completely explained by increased reporting.

Arizona routinely sees an increase in reported cases during the summer months, 2003 was no exception. 33% of Arizona's cases were documented in two months in 2003, May and June.

The very young carry the greatest risk of developing *Campylobacter* infection. Children under the age of four carry the highest risk (44.1 cases per 100,00), while in children between the ages of five and nine the risk drops to 10.5 cases per 100,000.

Campylobacter has been isolated from raw and undercooked chicken, puppies, kittens, other birds, swine, sheep, and cattle among other animals. Transmission has been documented through contact with infected animals, contaminated food, water, or raw milk and is thought to be transmitted rarely through person-to-person contact. Decreasing rates of campylobacteriosis in Arizona depends on limiting the exposure and spread of the organism among the very young and education concerning risk factors among adults, particularly in the more affected areas.

E. coli O157:H7

Forty-one cases of *E. coli* O157:H7 were reported to the Arizona Department of Health Services in 2003. *E. coli* O157:H7 infection has most often been associated with consumption of contaminated ground beef. However, outbreaks linked to contact with farm animals and petting zoos, cider, and swimming in contaminated water have been documented. Food workers and care givers are also a potential vehicle of transmission for *E. coli* O157:H7 due to the low infectious dose and must be excluded from work when diagnosed until asymptomatic.

Salmonellosis

Salmonellosis was replaced by campylobacteriosis as the most common reported laboratory confirmed gastrointestinal illness in 2003. The rate of cases in Arizona was lower in 2003 than in any of the last 6 years while rates of campylobacteriosis have increased each of the last six years. The Arizona Department of Health Services received 782 reported cases of Salmonellosis in 2003, a rate of 13.9 cases per 100,000 compared to a high of 915 cases in 1999, which translates to 16.3 cases per 100,000. The incidence of salmonellosis in Arizona has been decreasing overall since 1999. Even with the decreasing numbers, numerous outbreaks of gastrointestinal illness were linked to Salmonella infections in 2003.

Salmonella, like many of the other reportable enteric pathogens is typically isolated more frequently in the summer months in Arizona. While campylobacteriosis saw its peak in reporting in the early summer of 2003, salmonellosis saw its peak late in the summer months and into fall.

Children under five years of age had the highest rate of cases of salmonellosis in 2003 with 49.8 cases per 100,000. Children are typically the most afflicted age group diagnosed with enterics, including diagnoses of salmonellosis.

Shigellosis

The incidence of shigellosis in Arizona has remained fairly constant since 1998. A high of 685 cases (12.2 cases per 100,000) were laboratory confirmed in 2002, while 2003 saw 572 (10.1 cases per 100,000).

Cases of shigellosis reached a peak during the summer of 2003, consistent with most other reportable enteric pathogens. Reported cases of shigellosis peaked in late summer, in a similar fashion to salmonellosis cases reported in 2003. However, unlike some other enteric pathogens, *Shigella* is passed very easily from person to person through the fecal-oral route, requiring only 10 to 100 organisms to cause infection, which can translate into a more variable peak from year to year. The spread of *Shigella* from person to person can be easily controlled by frequent hand washing with soap and water.

Young children are disproportionately afflicted with shigellosis, as is the norm with enteric pathogens. Because of the organism's propensity to spread person to person, *Shigella* can cause clusters of cases in daycares, schools, or anywhere young children are together in large groups.

Less Common Bacterial Pathogens

Listeriosis is a rare, but potentially serious foodborne illness caused by the bacterium *Listeria monocytogenes*. *Listeria* can cause meningitis, spontaneous abortion, severe neurological sequalae, and death in some instances. Arizona saw 12 confirmed cases of listeriosis in 2003.

The genus *Vibrio* is comprised of a number of potential enteric pathogens, the most well known being *Vibrio cholera*. This organism can cause the potentially deadly disease cholera, which is still found in the developing world. One case of toxigenic O1 cholera was confirmed in 2003. The case had travel history in an endemic area outside of the USA. Two cases of *Vibrio vulnificus* were confirmed in Arizona in 2003. This organism is normally associated with wound infections after exposure to salt water. Case fatality rates associated with this organism are extremely high and are reported as 50% in people with underlying liver conditions. In addition, 17 cases of *Vibrio* infection associated with other species were reported in 2003. Yersiniosis is another uncommon enteric illness seen sporadically in Arizona. Seven cases were reported in 2003.

Giardiasis and Other Parasites

Giardiasis is the most common parasitic cause of gastrointestinal illness reported in Arizona. People are exposed to *Giardia* through contaminated water, person-to-person transmission, and contaminated food. Arizona reported 256 cases of giardiasis in 2003. The median over the last five years is 267 cases. Amebiasis caused by *Entamoeba histolytica* is also associated with exposure to contaminated water. 43 cases were reported in 2003. Six cases of cryptosporidiosis and one case of taeniasis, or tape worm, were also reported in 2003.

Norovirus

Norovirus is a very common virus associated with acute gastrointestinal symptoms lasting for 24-48 hours. It can be spread through the fecal-oral route, and aerosolization of vomit. Both foodborne and waterborne outbreaks have also been documented. Attack rates of greater than 50% are routine with Norovirus outbreaks due its ability to spread easily in long term care facilities, schools, daycares, and other situations in which people are in close contact. Surveillance for Norovirus has increased with the addition of the ability to test for the virus at Arizona's State Laboratory. Norovirus mediated illness in a single individual is not reportable in Arizona, however outbreaks are reported and investigated. Six outbreaks of Norovirus

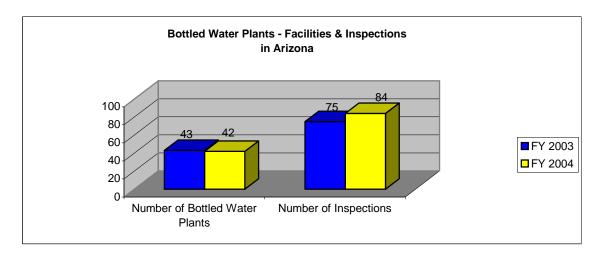
were confirmed in 2003, with seven more suspected but not confirmed due to lack of specimen for testing. Outbreaks involving 103, 98, and 88 ill people were all confirmed in 2003.

2.2 Bottled Water

Facilities that bottle water for distribution in Arizona are routinely inspected to evaluate the sanitation practices. In FY 2004, there were 42 bottled water facilities in Arizona. State and county sanitarians conducted 84 inspections in these facilities during FY 2004 and inspection goals were achieved.

Updating of Bottled Water Rules

During FY 2004, the Arizona Department of Health Services promulgated new rules for bottled water facilities. The new rules were necessary to provide a current standard of water quality consistent with the Code of Federal Regulations. The current rules also reference sections of the Code of Federal Regulations that have been changed and re-numbered.

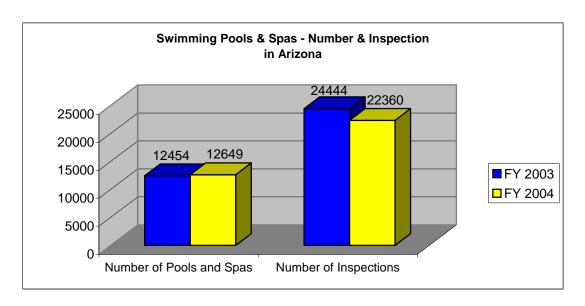


2.3 Bathing Places

Public and semipublic swimming pools and spas, as well as a few natural bathing places, are routinely inspected to evaluate whether these facilities are operated so that they prevent the spread of disease.

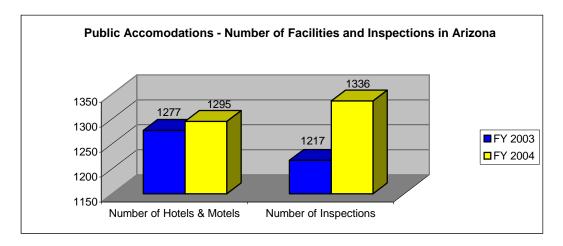
The rules apply only to the sanitary conditions of public and semipublic swimming pools and bathing places. A swimming pool or bathing place is "public" if it is open to members of the general public, regardless of whether a fee is charged for admission. A swimming pool or bathing place is "semipublic" if it is operated in conjunction with a lodging such as a hotel, motel, resort, apartment, townhouse or condominium complex, trailer court, mobile home park, or recreational vehicle park.

There were 12,649 public and semipublic swimming pools and spas in Arizona in FY 2004. State and county officials conducted approximately 22,360 bathing place inspections. State and county health departments implemented 285 enforcement actions at bathing places in FY 2004.



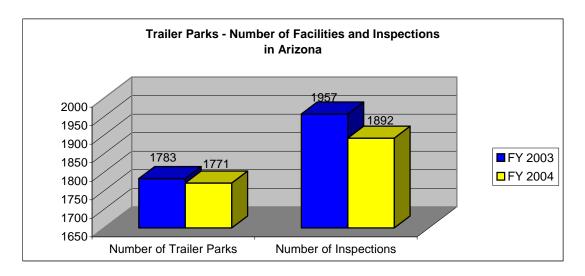
2.4 Public Accommodations

Public accommodations such as hotels, motels, and boarding houses are routinely inspected to evaluate sanitation practices. In FY 2004, there were 1,295 public accommodations in Arizona. State and county sanitarians conducted 1,336 inspections in these facilities. In FY 2004, 100% of the public accommodation facilities were inspected at least once. The statewide goal is to inspect each of the public accommodations once per year. State and county health departments implemented 3 enforcement actions at public accommodations in FY 2004.



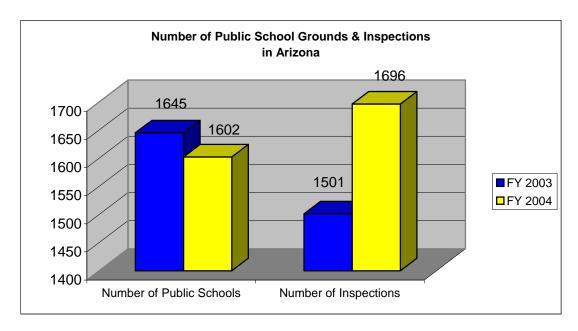
2.5 Trailer Coach Parks

Trailer coach parks are routinely inspected for general sanitation practices including, but not limited to, garbage and trash removal, sewerage connections, and water and wastewater. In FY 2004, there were 1,771 trailer parks in Arizona. State and county sanitarians conducted 1,892 inspections in these facilities. The statewide goal is to inspect each of the trailer parks once per year. The statewide goal was achieved. State and county health departments implemented 11 enforcement actions at trailer coach parks in FY 2004.



2.6 School Grounds

Public schools (including charter schools) are routinely inspected to determine whether they are in compliance with sanitation requirements. The inspections focus primarily on general sanitation including garbage and trash removal, drinking fountains, locker rooms, and restrooms. Cafeterias at the schools are considered food establishments and inspections are made under the food safety program (see Section 2.1).



In FY 2004, there were 1,602 public schools in Arizona. State and county sanitarians conducted approximately 1,696 inspections in the schools. The statewide goal is to inspect each of the schools grounds once per year. In FY 2004, 100% of the public schools were inspected at least once. State and county health departments implemented 3 enforcement actions at public schools in FY 2004.

2.7 Children's Camps

Children's camps are routinely inspected to determine if they are in compliance with sanitation and food safety requirements. The inspections focus primarily on general sanitation including garbage and trash removal, locker rooms, restrooms, and sleeping quarters. Inspections are also conducted at the food service kitchens. Inspections for children's camps are tracked by annual year rather than by fiscal year since the camps are open seasonally in the summer months of June to September. Tracking by annual year allows for more effective management of children's camp inspections.

There were 58 children's camps that applied for an annual permit. Most of the camps are located in Yavapai and Gila counties. Some of the camps operate for several months during the summer, while others may operate for only a few days.

Forty seven inspections of children's camps where conducted during FY 2004. No enforcement actions were necessary at a children's camp in FY 2004.

3.0 Points of Interest

County and state Registered Sanitarians and Sanitarian Aides provided West Nile Virus emergency response services and related activities during FY 2004. Despite the added workloads and assignments in this important activity, inspection frequencies as outlined in the county delegation agreements were achieved during FY 2004.

4.0 Registration and Training of Sanitarians

Inspectors that implement the inspection programs for the statewide public health sanitation program must be licensed as a Registered Sanitarian in the State of Arizona or, under specific conditions, a Sanitarian Aide under the direct supervision of an Arizona Registered Sanitarian. Registration as a sanitarian requires an applicant to meet the statutory requirements in ARS 36-136.01 and pass an exam. Sanitarians are also required to submit annual renewal applications. These requirements ensure that a trained and competent work force is implementing the inspection programs.

Statewide, there were 168 Registered Sanitarians employed at the 15 Arizona county health departments and the Arizona Department of Health Services. Twelve sanitarians have been standardized in the new food code requirements. Standardization is a process by which experienced sanitarians can be trained to focus on critical factors and to maintain consistency. The updated standardization procedure is far more complex and time consuming than previous standardization requirements, reflecting the increased professional nature of the work involved.

Update of Sanitarian Rules

The Arizona Revised Statutes pertaining to Registered Sanitarians went through a legislative change during the last year. The main points of the change were providing for Continuing Education as part of the renewal process and implementation of a reciprocity option. Sanitarians are now required to obtain 12 continuing education contact hours annually. There is no longer a carry-over option. Also, reciprocity can be afforded to those who are registered within another jurisdiction, have passed a substantially similar exam with a score of 70% or better, and who would have qualified to have otherwise taken the Arizona examination.

Trainings Offered

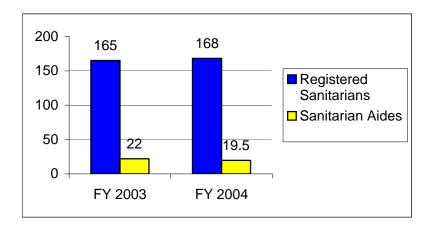
The U.S. Food and Drug Administration presented their 3-day *Plan Review for Food Establishments Course* for Arizona Registered Sanitarians on January 6 - 8, 2004 in Phoenix, Arizona.

Annual Data Tracking

A computer-based tracking aid has been developed to assist interested counties with their annual reporting requirements. This tool will continue to be offered during the coming year.

Number of Sanitarians and Sanitarian Aides Employed by Jurisdiction in FY 2004

Jurisdiction	Sanitarians	Sanitarian Aides
ADHS/ASU	8	0
Apache	2	1
Cochise	9	1
Coconino	5.5	0.5
Gila	3	0
Graham	1	0
Greenlee	0.5	1
La Paz	3	1
Maricopa	87	5
Mohave	7	4
Navajo	1	1
Pima	20	2
Pinal	9	1
Santa Cruz	4	2
Yavapai	3	0
Yuma	5	0
Total	168	19.5



5.0 Conclusions

- Representatives from the 15 Arizona county health departments and the Arizona Department of Health Services conducted 98,885 inspections at 46,846 regulated facilities during FY 2004.
- There were 29,403 food establishments in Arizona in FY 2004. 71,450 food safety inspections (routine, re-inspection, and pre-operational) were conducted at these establishments.
- A total of 2,257 cases of foodborne illnesses were reported to the Arizona Department of Health Services during calendar year 2003.
- Inspection goals were achieved for food establishments, bottled water facilities, bathing places, public accommodations, trailer coach parks, and school grounds.

Appendix

	Apache	Cochise	Coconino	B.	Graham	Greenlee	La Paz	Maricopa
	Ap	ව	S	Gila	Gr	Ğ	Ľa	Ma
Jurisdiction activity by type	,		_				1 ' '	
Food Establishments	400		1010	220				10010
Current number of food establishments	133	411	1010	339	144	46	217	18018
Mobile	1	43	12	NR	NR	2	20	2150
Simple	39	82	305	117	60	4	81	6231
Medium	33	86	164	93	24	10	35	4470
Complex	60	200	529	129	60	30	81	5167
Number of routine inspections	118	1744	1459	206	206	72	272	43107
Number of reinspections	2	187	574	36	7	12	22	3361
Number of pre-operational inspections	6	256	107	29	14	2	17	3515
Number of foodborne illness complaints	1	14	61	9	6	2	1	194
Number of non-foodborne illness complaints	2	118	129	19	8	10	11	2803
Number of compliance proceedings	0	7	4	NR	0	0	1	771
Number of temporary food establishment	12	437	187	67	28	26	170	2358
inspections								
Outreach								
Number of presentations	NR	22	104	37	9	21	NR	NR
Number of consultations/counseling provided	NR	1048	1151	228	25	127	NR	NR
Number of media contacts	NR	24	2	NR	0	2	NR	NR
Non-food related activities								
Public & semi-public bathing places	4	106	223	25	19	2	23	8784
Routine inspections	2	550	173	8	14	4	43	15108
Complaint inspections	0	9	9	2	0	0	0	404
Enforcement actions	0	2	0	0	0	0	0	26
Trailer coach parks	0	98	90	NR	11	6	189	526
Routine inspections	0	116	56	NR	11	6	174	561
Complaint inspections	0	7	1	NR	0	1	3	52
Enforcement actions	0	0	0	NR	0	0	2	7
Public school grounds	0	44	24	NR	*	4	10	1016
Routine inspections	0	128	1	NR	*	4	5	1102
Complaint inspections	0	0	9	NR	*	0	0	43
Enforcement actions	0	0	0	NR	*	0	NR	3
Camp grounds	0	0	14	NR	0	0	7	0
Routine inspections	0	0	13	NR	0	0	6	0
Complaint inspections	0	0	0	NR	0	0	0	0
Enforcement actions	0	0	NR	NR	0	0	0	0
Children's camps	0	2	*	8	1	0	0	*
Routine inspections	0	2	*	6	1	0	0	*
Complaint inspections	0	0	*	NR	0	0	0	*
Enforcement actions	0	0	*	NR	0	0	0	*
Public accommodations	34	79	190	41	10	3	24	438
Routine inspections	14	95	183	4	5	2	25	543
Complaint inspections	0	4	15	2	0	0	0	26
Enforcement actions	0	0	0	NR	0	0	0	1
Bottled water	0	0	2	NR	0	0	1	27
Routine inspections	0	0	2	NR	0	0	1	63
Complaint inspections	0	0	0	NR	0	0	0	7
Enforcement actions	0	0	0	NR	0	0	0	0

NR = Not Reported * = Performed by ADHS, and not within County reports

Appendix

		1	I	1	1	I		
	Mohave	Navajo	Pima	Pinal	Santa Cruz	Yavapai	Yuma	ADHS/ASU
Jurisdiction activity by type								`
		Food E	stablishment	s				
Current number of food establishments	1328	405	3965	768	308	1052	538	721
Mobile	89	16	621	65	NR	58	108	0
Simple	405	119	535	220	119	212	92	94
Medium	350	155	1544	292	61	389	131	437
Complex	484	115	1265	191	128	393	207	190
Number of routine inspections	1307	452	7291	1137	516	1683	1164	1265
Number of reinspections	73	10	163	54	84	78	59	25
Number of pre-operational inspections	128	17	267	121	8	125	87	5
Number of foodborne illness complaints	25	NR	155	22	0	1	9	5
Number of non-foodborne illness complaints	213	181	500	107	10	97	20	14
Number of compliance proceedings	7	4	25	0	0	0	NR	1
Number of temporary food establishment	28	144	1415	487	0	90	63	93
inspections								
		C	utreach					
Number of presentations	NR	NR	40	1	22	NR	NR	15
Number of consultations/counseling provided	NR	NR	550	66	224	NR	NR	53
Number of media contacts	NR	NR	60	0	0	NR	NR	0
			related activi					
Public & semi-public bathing places	252	11	2515	240	37	181	212	15
Routine inspections	416	24	3841	1119	43	376	597	42
Complaint inspections	20	3	205	5	0	7	16	0
Enforcement actions	6	0	250	0	0	0	NR	1
Trailer coach parks	106	13	434	71	21	NR	206	0
Routine inspections	61	4	407	26	32	NR	438	0
Complaint inspections	3	4	60	0	0	NR	10	0
Enforcement actions	1	1	NR	0	0	NR	NR	0
Public school grounds	41	26	233	0	26	48	52	78
Routine inspections	2	26	227	2	28	10	83	78
Complaint inspections	2	1	15	2	0	0	NR	0
Enforcement actions	0	NR	NR	0	0	0	NR	0
Camp grounds	4	NR	NR	1	0	NR	NR	0
Routine inspections	1	NR	NR	0	0	NR	NR	0
Complaint inspections	0	NR	NR	0	0	NR	NR	0
Enforcement actions	0	NR	NR	0	0	NR	NR	0
Children's camps	0	5	NR	2	1	16	NR	23
Routine inspections	0	5	NR	1	0	11	NR	21
Complaint inspections	0	0	NR	0	0	0	NR	0
Enforcement actions	0	0	NR	0	0	0	NR	0
Public accommodations	94	NR	183	31	20	111	37	0
Routine inspections	83	14	153	21	34	108	52	0
Complaint inspections	5	14	20 ND	1	0	7	4	0
Enforcement actions	2	0	NR	0	0	0	NR	0
Bottled water	5	2	2	1	1	1	NR	0
Routine inspections	7	2	4	2	2	1	NR	0
Complaint inspections	0	0	0	0	0	0	NR	0
Enforcement actions	0	0	NR	0	0	0	NR	0

NR = Not Reported
* = Performed by ADHS, and not within County reports